



FORM 4309A SEMI-ANNUAL COMMERCIAL FEED TONNAGE REPORT

Washington State Department of Agriculture
Pesticide Management Division
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(Please see instruction sheet for completing form)

This form must be completed if you listed tonnage on line 1b of form 4309.

A	<u>REPORTING PERIOD</u>
Check the applicable box and enter year: <input type="checkbox"/> January 1-June 30, 200__ <input type="checkbox"/> July 1-December 31, 200__	

B	COMPANY NAME	COMPANY #
Enter the company name and company number listed on form 4309, box B:		

C List the facility/location name, address and tons for each company that has paid inspection fees for the tonnage you have listed on line 1b of form 4309. The information you provide on this form will be verified against the inspection reports from the companies you have listed.			For Dept. Use Only Co. #
Company Name:		TONS	
Address:			
Company Name:			
Address:			
Company Name:			
Address:			
Company Name:			
Address:			
Company Name:			
Address:			
Company Name:			
Address:			
Company Name:			
Address:			
Company Name:			
Address:			
GRAND TOTAL: (This amount must equal the amount listed on form 4309, line 1b)			D